

| POSITION                         | INITIALS | ID # | DATE     |
|----------------------------------|----------|------|----------|
| <b>FEE DETERMINATION</b>         |          | (20) |          |
| <b>O.I.P.E. CLASSIFIER</b>       |          |      | 7/16     |
| <b>FORMALITY REVIEW</b>          | P. B.    | 1137 | 10/06/01 |
| <b>RESPONSE FORMALITY REVIEW</b> | Request  | 925  | 03-28-02 |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 0 ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | ✓     | ✓        | 11/17/00 |
| 2     | ✓     | ✓        | 5/31/03  |
| 3     | ✓     | ✓        | 11-27-04 |
| 4     | ✓     | ✓        | 6/2/04   |
| 5     | ✓     | ✓        |          |
| 6     | ✓     | ✓        |          |
| 7     | ✓     | ✓        |          |
| 8     | ✓     | ✓        |          |
| 9     | ✓     | ✓        |          |
| 10    | ✓     | ✓        |          |
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| 12    | ✓     | ✓        |          |
| 13    | ✓     | ✓        |          |
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| 15    | ✓     | ✓        |          |
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| 21    | ✓     | ✓        |          |
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| 25    | ✓     | ✓        |          |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Cop,

5C-89  
10/16/02  
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